

EMPLOYEE ACTION FORM City of Dayton

Employee ID No. 25263		Last Name Stiver		First Name Wendy		Middle Initial H.		Effective dd - month - yy Date: 8-August-2016	
CURRENT Posl. (T.O.) No. 7207		Position Classification Police Lieutenant				Division Director's Office			
REASON FOR CHANGE (Check only those that apply.) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> New Appointment <input type="checkbox"/> Re-Appointment <input checked="" type="checkbox"/> Promotion <input type="checkbox"/> Transfer <input type="checkbox"/> Demotion - Voluntary <input type="checkbox"/> Demotion - Involuntary <input type="checkbox"/> Reclassification </div> <div style="width: 50%;"> <input type="checkbox"/> Step Increase <input type="checkbox"/> Merit Increase <input type="checkbox"/> Rate Change <input type="checkbox"/> Assignment Maintenance/Pay <input type="checkbox"/> Reduction in Force <input type="checkbox"/> Resignation <input type="checkbox"/> Resignation Under Charges </div> <div style="width: 50%;"> <input type="checkbox"/> Deceased <input type="checkbox"/> Retirement <input type="checkbox"/> Disability Retirement <input type="checkbox"/> Probationary Discharge <input type="checkbox"/> Discharge <input type="checkbox"/> End of Temp. appt. <input type="checkbox"/> Change in Type of Appt. <input type="checkbox"/> Payroll Data Change </div> <div style="width: 50%;"> <input type="checkbox"/> Adjust Service Date <input type="checkbox"/> Leave Status <input type="checkbox"/> Add/Delete Premium Pay <input type="checkbox"/> Add/Delete Automatic Earning <input type="checkbox"/> Add/Delete Other Earnings <input type="checkbox"/> Change in Labor Distribution <input type="checkbox"/> Other: Specify _____ </div> </div>									
INSTRUCTIONS: The above sections must be completed each time an Employee Action Form is submitted. In sections below, only complete information that is changing. ALL P-1'S MUST BE TYPED.									
NEW POSITION No. (T.O.) 7115		Req. No. 723M		Posn. Classification Police Major		Grade A16		Step	
Hrly. Rate 45.44		TYPE OF APPOINTMENT <input checked="" type="checkbox"/> Full time <input type="checkbox"/> Part Time		<input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal		<input type="checkbox"/> Co-Op			
ORGANIZATION HOME: 10000		Org. Code 6242		Division Central Patrol Operations		DATE OF NEXT STEP dd - month - yy			
ORGANIZATION TIMESHEET 10000		Org. Code 6210		Division Director's Office		TERMINATION			
LEAVE STATUS From: (First Date of Absence)		To: (Last Date of Absence)		Vac. Hours Due		Last Date Worked		dd - month - yy	
				Comp. Time Due 175.97		Sick Hours Due		Paid Through	
LEAVE REQUESTED		PAY STATUS		Calendar Days of Leave		ADJUSTED SERVICE DATES			
<input type="checkbox"/> Injury Leave		<input type="checkbox"/> Full Pay				Seniority			
<input type="checkbox"/> Military Leave		<input type="checkbox"/> Without Pay				Longevity			
<input type="checkbox"/> Leave of Absence		<input type="checkbox"/> Partial Pay ___%		Work Days of Leave		Supplemental Vacation			
<input type="checkbox"/> Suspension				Date of Actual Return					
<input type="checkbox"/> AWOL									
PREMIUM PAY (Used for permanent assignment only.)		Add		Delete		Amt./Hr.			
<input type="checkbox"/> Fire 40 Hour Assign. Pay		<input type="checkbox"/>		<input type="checkbox"/>				Shift Differential 2 nd	
<input type="checkbox"/> Police Shift Differential		<input type="checkbox"/>		<input type="checkbox"/>				Shift Differential 3 rd	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				Other	
AUTOMATIC EARNINGS (Earnings that automatically appear on time sheet.)		ADD		DELETE		OTHER QUALIFIED EARNINGS			
<input type="checkbox"/> Clothing Allowance		<input type="checkbox"/>		<input type="checkbox"/>		Mileage Reimbursement			
<input type="checkbox"/> Platoon Shift Factor (Airport)		<input type="checkbox"/>		<input type="checkbox"/>		Educational Incentive Degree			
<input type="checkbox"/> Platoon Shift Factor (Fire)		<input type="checkbox"/>		<input type="checkbox"/>		Classification		Amount	
<input type="checkbox"/> Fire PSM Pay		<input type="checkbox"/>		<input type="checkbox"/>		Plus Rate			
<input type="checkbox"/> Executive Car Allowance		<input type="checkbox"/>		<input type="checkbox"/>		Plus Rate			
		<input checked="" type="checkbox"/>		<input type="checkbox"/>		Other		Cell Phone Allowance \$23.08 per pay period.	
REMARKS: <i>Old Rate: 41.60 (3.84) 79,87.20 / 94,515.20</i> Employee will be promoted to Major effective August 8, 2016.									
Approved		Disapproved		Approved		Disapproved			
<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>			
Division Manager		Date		Director of Human Resources		Date			
<i>Richard A. Biedel</i>		<i>8/8/16</i>		<i>[Signature]</i>		<i>8/8/16</i>			
Department Director		Date		City Manager		Date			
<i>[Signature]</i>		<i>8/8/16</i>		<i>[Signature]</i>		<i>8/8/16</i>			